



SUMMER EMPLOYMENT 2011

Return Completed Application To:
City of Durham – Human Resources Department
101 City Hall Plaza – Durham, North Carolina 27701
Website: www.durhamnc.gov

Mayor's Summer Youth Work Program

Are you between the
ages of 14 and 21?

☐ Yes ☐ No

ONE APPLICATION PER POSITION

Check only one (1) box

☐ **Impact Team (NIS)** Position Title _____

☐ **OEWD** Position Title _____

☐ **Parks & Recreation** Position Title _____

Preferred Locations: (1) _____ (2) _____

Willing to work at any location (Yes or No) _____

Do you meet the minimum age requirement for the position you selected? (Yes or No) _____

☐ **Office on Youth** Position Title _____

Preferred Location: (1) _____ (2) _____

Do you meet the minimum age requirement for the position you selected? (Yes or No) _____

NOTE: LISTING A PREFERENCE DOES NOT GUARANTEE JOB OFFER AT YOUR PREFERRED LOCATION

Name: _____
Last First MI

Address: _____
No & Street City State Zip Code

Driver's License # Class Type: _____ Number: _____ State: _____ Expiration Date: _____

Telephone # _____ - _____ - _____ Alternate # _____ - _____ - _____ Best Time to Contact: ☐ _____ A.M. ☐ _____ P.M.

Email: _____

Are you related by blood or marriage to any person now employed by the City of Durham? ☐ Yes ☐ No

Give name/relationship/and work location of relative(s) _____

EDUCATION

School Name and Location	From/To Attended	Completed # of Years	Diploma or Degree	Year Received	Subject
Middle School					
High School					
College/Other					

EMPLOYMENT HISTORY

May we contact your present or last employer regarding your experience and qualifications? ☐ Yes ☐ No

Work History – List below all employment for the last 5 years; **additional space available on additional information page.**

Job Title: _____ Dates Employed: _____ Reason for Leaving: _____

Employer's Name: _____ Address: _____ Phone #: _____

Supervisor's Name: _____ Describe Work Duties/Responsibilities: _____

SKILLS INVENTORY

Check all certificates, skills, or experience which you possess and indicate the length of experience.

General

- ☐ Record Keeping/Cashier _____
- ☐ Working with Senior Citizens _____
- ☐ Working with Young Children (5-12) _____
- ☐ Working with Adolescents (13-18) _____
- ☐ Secretary/Receptionist/Accounting _____
- ☐ Lawn Care _____
- ☐ Painting _____

Pool Positions

- ☐ CPR Certification ##### _____
- ☐ Lifeguard Certification ##### _____
- ☐ W.S.I Certification ##### _____
- ☐ Lifeguard Instructor Certification ##### _____
- ☐ Pool Supervisor _____
- ☐ Pool Maintenance _____

Athletics

- ☐ Volleyball _____
- ☐ Soccer _____
- ☐ Softball _____
- ☐ Flag Football _____
- ☐ Baseball _____
- ☐ Basketball _____
- ☐ Tennis _____
- ☐ Other _____

Special Programs

(Working with Persons with Disabilities)

- ☐ Physical Disabilities _____
- ☐ Deaf/HOH ##### _____
- ☐ Visual Impairments _____
- ☐ Multiple Disabilities ##### _____
- ☐ Intellectual Disabilities ##### _____
- ☐ Adapted Aquatics ##### _____
- ☐ American Sign Language ##### _____
- ☐ Other ##### _____

Programs/Day Camps

(Planned activities as Group Leader or Instructor)

- ☐ Swimming ##### _____
- ☐ Group Games ##### _____
- ☐ Arts and Crafts _____
- ☐ Drama _____
- ☐ Music _____
- ☐ Health and Fitness ##### _____
- ☐ Sports ##### _____
- ☐ Dance ##### _____

ADDITIONAL SKILLS OR INFORMATION – List any additional skill or information you possess which relates to this position.

VOLUNTEER EXPERIENCE

Organization/Volunteer Site	Year Volunteered	# of Hours	Duties/Responsibilities

CERTIFICATION AND RELEASE (PLEASE READ CAREFULLY BEFORE SIGNING BELOW) I hereby certify that all statements on this application and applicant flow sheet are true and complete to the best of my knowledge and belief. I understand that falsification (including omission) regarding this record may be considered cause for immediate termination of employment; or disqualification from the applicant process, if discovered before employment. I authorize the City to use the information provided and to review my background including but not limited to reference checks, education, driving record verification, and credit history. This information may also be used for internal data and record keeping. I authorize persons, schools, and current and previous employers to provide the City with any relevant information needed to consider me for employment.

*Please be advised that the most qualified applicants will be referred to the hiring department for further consideration. The hiring department will contact you **only if** you are selected for an interview.

Signature _____

Date _____

FOR HUMAN RESOURCES USE ONLY

Referred _____ Not Referred _____

Screened By/Date _____

Referred To/Date _____

HR/02/11

CITY OF DURHAM, NORTH CAROLINA

APPLICANT INFORMATION

EEO Data

The City of Durham prohibits discrimination on the basis of sex, race, color, religion, national origin, age or disability. The following information is requested for record keeping purposes. The information will not be used for making employment decisions and will be separated from your application. The purpose of this information is to measure the success of our recruitment efforts in reaching all segments of the population, and to comply with the Rehabilitation Act of 1973.

PERSONAL DATA

Name: _____ Position Applied For: _____
Last First Middle Initial

SEX

☐ Male ☐ Female

RACIAL/ETHNIC IDENTITY

☐ Asian/Islander ☐ Black/African American ☐ Hispanic/Latino ☐ Native American
☐ White/Caucasian ☐ Multi-Racial ☐ Other _____ (Please Specify)

HOW DID YOU LEARN OF THIS OPPORTUNITY?

☐ City Application ☐ City Employee Referral ☐ Newspaper Ad
☐ City Job Line ☐ Job Fair ☐ Walk-In
☐ Job Announcement ☐ Personal Referral ☐ City of Durham Website
☐ Employment Security Commission ☐ Other _____ (Please Specify)

IF YOU ARE A DISABLED VETERAN, WHAT IS YOUR STATUS?

☐ Disabled Veteran – entitled to disability compensation of 30% or more; discharged from military service due to service related disability.

☐ Vietnam era Veteran – person who served at least 180 days of which a part was during Vietnam era; person who was discharged or released due to a service connected disability if any part of the service was performed during the Vietnam era.

☐ Disabled Vietnam era Veteran

WHAT IS YOUR CITIZENSHIP STATUS?

☐ U.S. Citizen ☐ Resident Foreign National ☐ Non-resident Foreign National

Name: _____ Position Applied For: _____
Last First Middle Initial

EMPLOYMENT HISTORY (additional information)

Job Title: _____ Dates Employed: _____ Reason for Leaving: _____
Employer's Name: _____ Address: _____ Phone #: _____
Supervisor's Name: _____ Describe Work Duties/Responsibilities: _____

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CRIMINAL HISTORY (additional information)

ADDITIONAL INFORMATION